

STATE OF MAINE REQUEST FOR PROPOSALS RFP BIDDERS CONFERENCE AND SUBMITTED QUESTIONS & ANSWERS SUMMARY

	RFP # 201605104, Clinically Managed Low-Intensity	
RFP NUMBER AND TITLE:	Residential Services for	
	Pregnant and Parenting Women	
DIDDEDS CONFEDENCE LOCATION.	41 Anthony Ave. Augusta Maine 04330, Main	
BIDDERS CONFERENCE LOCATION:	Conference Room (2 nd Fl.)	
BIDDERS CONFERENCE DATE/TIME:	June 13, 2016, 10:30 a.m.	
SUBMITTED QUESTIONS DUE DATE:	June 20, 2016	
QUESTION & ANSWER SUMMARY ISSUED:	July 25, 2016	
PROPOSAL DUE DATE:	August 16, 2016	
RFP ISSUED BY:	Office of Substance Abuse and Mental Health Services	
	Division of Purchases	
PROPOSALS DUE TO:	Burton M. Cross Building, 4 th Floor	
	111 Sewall Street	
	9 State House Station	
	Augusta, ME 04333-0009	

Unless specifically addressed below, all other provisions and clauses of the RFP remain unchanged.

Provided below are questions asked at the Bidders Conference.

Question #	Question	Answer
1	Pertaining to the Budget: a. Will the rate that is used to bill for this service be the same rate as the current Mainecare	a. Yes.
	rate for Halfway House? b. Will it be an enhanced rate (because it includes children)?	 Bidders may build costs related to children's stay into the proposal budget at their discretion.
	p. 10, #4: a. Is there an expectation that children will be co-housed (in	a. Yes.
2	the same room) as (parent) women in residence? b. What level of ADA compliance is expected, pertaining to square footage of rooms,	b. It is at the discretion of the Bidders how to respond.

	access to elevators, and first floor access vs. stairs?	
3	p. 11, #12: Must LCPCs and LCSWs be dually licensed? Please provide clarification regarding licensing requirements for these positions.	No. However they must have completed one (1) year clinical experience in substance abuse treatment and a minimum of sixty (60) hours of alcohol and drug education within the last five (5) years (14-118 CMR Chapter 5, Regulations for Licensing and Certifying of Substance Abuse Treatment Programs, Section 9.2.1.2.) Please see Amendment #1.
4	Are there specific locations where residential services (contained in this RFP) are to be provided?	No.
5	Part II. Eligibility: The RFP states that only pregnant and parenting women may be accepted into the program. Can women who have children who are over the age of five, or have children who do not live with them maintain eligibility to receive residential services contained in the RFP?	Please give priority in the following order: 1. pregnant injection drug users; 2. pregnant substance users; 3. parenting - injection drug users; 4. parenting women - substance users Parenting may be defined in numbers 3 and 4 above as women with children, ages birth through 5 years. Children may be living at home, and in the parent's custody, or in-care and the parent is attempting to regain custody. Women with children over the age of five and under the age of majority (18 years) may be admitted to the program if there is no one waiting who meets the criteria for 1 through 4 above.
6	p. 9, B, #3.: Please clarify what definition of case management is used in this RFP- for instance, Sections 17, 13 and 92 of MaineCare have different definitions. Are there any other definitions that apply to this RFP?	Case management for women shall be defined by MBM Section 13.03 B.
7	p. 9, B, #3.: In light of current changes in Case Management, is Targeted Case Management the only definition that	MBM Section 13.03 B has not been changed.

	would apply [to this RFP]?	
8	 p. 10, # 9. Regarding 5 scheduled hours per week of treatment and 12 scheduled hours per week of rehabilitative groups: a. Does the RFP assume clinical treatment is only individual (for the 5 hours); b. does (the 12 hours) include group therapy; c. Does it include life skills /rehabilitation groups? 	a. No. The five hours of clinical treatment may be provided in individual, group, or family sessions.b. Yes.c. Yes.
9	p. 11, #12.Please provide clarification regarding the definition of crisis intervention and emergency transport.	The Department declines to answer.
10	p. 11, #12.Are there any requirements regarding ratio of staff to residents?	No.
11	Part IV, C., and # 9: Please provide clarification of what documentation is being sought regarding Documentation of Training.	Any documentation provided will be reviewed, including but not limited, to training certificates, training logs, credentials, policies, and procedures manual, etc.
12	p. 11, # 15. What sections of MaineCare can be billed for this service, specifically PNMIs?	This service falls under Halfway House, Chapter III, Section 97, Appendix B.
13	p. 10, # 5. How are Bidders expected to implement Best Practices: through direct implementation or implementation through referrals? (please clarify)	Please see Part II – Scope of Services to be Provided, Section B – Requirements, #5.
14	p. 11, # 10.Regarding coordinating [MAT Services] with the closest provider, is utilizing telemedicine allowable?	Telemedicine is now permitted per Adopted Rules: 10-144, Chapter 101, MaineCare Benefits Manual, Chapter I, Section 4, Telehealth Services; 10-144, Chapter 101, MaineCare Benefits Manual, Chapter I, Section 1, General Administrative Policies and Procedures.

15	p. 11, # 10., c. Can the Department clarify how billing 2 different services provided on the same day may be functionally billed? (It is not clear how with bundled rates for some services, billing can be done).	Please contact MaineCare provider relations for information.
16	 p. 9, # 4. a. Is there flexibility in the number of beds required? b. If there are 10 beds required for women and 10 beds required for children, what happens when there are more than 10 children and fewer than 10 women? c. Does the 90% capacity rate relate to women only? d. Are children considered clients? 	 a. No. b. The awarded bidder may not accept more than 10 women at a time and no more than 10 children at a time. c. Yes. d. No.
17	p. 16, B.a. Why is a \$5000.00 appeal deposit required?b. When would the appeal deposit be expected to be refunded?	 a. The Department of Administrative and Financial Services (DAFS) reserves the right to require an appeal deposit to offset the costs incurred should an appeal occur. b. After the appeal period has ended.

Provided below are submitted written questions received and the Department's answers

Question #	Question	Answer
	On page 7 of the RFP # 201605104 Clinically Managed Low-Intensity Residential Services for Pregnant and Parenting Women, under the following section, it states:	
1	C. Eligibility to Submit Bids All interested parties are invited to submit bids in response to this Request for Proposals.	Yes. Please see Amendment #1.
	Can an out-of-state provider with significant experience in the provision of this service submit an application that would be considered even if we are not currently licensed?	
2	Is it possible for a provider who is licensed and providing excellent similar services in another state to have a proposal considered?	Yes. See Amendment #1.
3	Are the Appendices to be put in the proposal in the order set forth in Part IV of the RFP, even though that would mean they would not be in order alphabetically, OR should the Appendices be added after the Narrative, but before the Attachments?	It is at the Bidder's discretion how to assemble the proposal.
4	Does the Debarment, Performance and Non- Collusion Certification go after the Cover Page and before the Table of Contents after which the pagination begins?	It is at the Bidder's discretion how to assemble the proposal.